

Individual Registration Form



Full name:	
Address:	
Landline:	
Mobile:	
Email:	
Dob:	Ethnicity:
Umpiring qualification:	
Coaching qualification:	
Team name you are joining:	

Individual Signature:	Date:
Team Coach/Managers signature:	Date:
TNC Registration Officer signature:	Date:

OFFICE USE:	
Is this person currently registered with another team for this season?	NO / YES
What date does this person become eligible to take the court?	
(48 hours from date of your receipt)	
Was this person registered with a team that still owes the centre fees?	NO / YES